## 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000011287

Entity Name: TRACT 5 HOMEOWNERS' ASSOCIATION, INC.

FILED
Mar 18, 2021
Secretary of State
8407610608CC

## **Current Principal Place of Business:**

C/O ARTEMIS LIFESTYLES, INC 1631 E. VINE STREET SUITE 300 KISSIMMEE, FL 34744

## **Current Mailing Address:**

C/O ARTEMIS LIFESTYLES, INC 1631 E. VINE STREET SUITE 300 KISSIMMEE, FL 34744 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ARTEMIS LIFESTYLE SERVICES, INC. 1631 E. VINE STREET SUITE 300 KISSIMMEE, FL 34744 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DAVID BURMAN 03/18/2021

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title D, TREASURER
Name BROWNE, BRADLEY Name PARKS, LINDA

Address C/O ARTEMIS LIFESTYLES, INC Address C/O ARTEMIS LIFESTYLES, INC

1631 E. VINE STREET SUITE 300 1631 E. VINE STREET SUITE 300

City-State-Zip: KISSIMMEE FL 34744 City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR Title VICE PRESIDENT AND SECRETARY

Name BECHTOLD, KAITLIN MARIE Name THALL, DANIEL S

Address C/O ARTEMIS LIFESTYLES, INC Address C/O ARTEMIS LIFESTYLES, INC

1631 E. VINE STREET SUITE 300 1631 E. VINE STREET SUITE 300

City-State-Zip: KISSIMMEE FL 34744 City-State-Zip: KISSIMMEE FL 34744

Electronic Signature of Signing Officer/Director Detail

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.